

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation DEFENDERS OF WILDLIFE ACTION FUND		3. FEC Identification Number C C90007907
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1130 17TH ST NW		
(c) City, State and ZIP Code WASHINGTON DC 20036		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☐ 24-Hour Notice ☒ 48-Hour Notice
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M	M
0	9

 /

D	D
0	5

 /

Y	Y	Y	Y
2	0	0	8

THROUGH

M	M
0	9

 /

D	D
0	8

 /

Y	Y	Y	Y
2	0	0	8

6. TOTAL CONTRIBUTIONS

										.00
--	--	--	--	--	--	--	--	--	--	-----

7. TOTAL INDEPENDENT EXPENDITURES.....

										2514.32
--	--	--	--	--	--	--	--	--	--	---------

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

William Lutz

09/09/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 / 4

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Jesse Lifton

Date

M M / D D / Y Y Y Y
0 9 / 0 5 / 2 0 0 8Mailing Address
1600 San Pedro Dr NE

Amount

8.78

City
AlbuquerqueState
NMZip Code
87102Purpose of Expenditure
mileageCategory/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Steve PearceDisbursement For:
2008☐ Primary☒ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

5825.91

Full Name (Last, First, Middle Initial) of Payee
PNM

Date

M M / D D / Y Y Y Y
0 9 / 0 5 / 2 0 0 8Mailing Address
414 Silver Ave SW

Amount

281.71

City
AlbuquerqueState
NMZip Code
87102Purpose of Expenditure
phonesCategory/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Steve PearceDisbursement For:
2008☐ Primary☒ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

563.42

Full Name (Last, First, Middle Initial) of Payee
Sisy Garcia

Date

M M / D D / Y Y Y Y
0 9 / 0 5 / 2 0 0 8Mailing Address
204 Valencia Dr NE

Amount

8.19

City
AlbuquerqueState
NMZip Code
87108Purpose of Expenditure
mileageCategory/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Steve PearceDisbursement For:
2008☐ Primary☒ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

2442.15

(a) SUBTOTAL of Itemized Independent Expenditures

298.68

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **3 / 4**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee

Sisy Garcia

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	8

Mailing Address

204 Valencia Dr NE

Amount

8.19

City

Albuquerque

State

NM

Zip Code

87108

Purpose of Expenditure

mileage

Category/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Steve Pearce

Disbursement For:

☐ Primary☒ General2008
☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

2442.15

Full Name (Last, First, Middle Initial) of Payee

Alvarado Apartments

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	0	8

Mailing Address

611 Lead Ave #505

Amount

1807.13

City

Albuquerque

State

NM

Zip Code

87102

Purpose of Expenditure

housing cost

Category/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Steve Pearce

Disbursement For:

☐ Primary☒ General2008
☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

2157.13

Full Name (Last, First, Middle Initial) of Payee

Alvarado Apartments

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Mailing Address

611 Lead Ave SW #428

Amount

350.00

City

Albuquerque

State

NM

Zip Code

87102

Purpose of Expenditure

housing cost

Category/
Type

Office Sought:

☐ House

State: NM

☐ Senate

District: _____

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Steve Pearce

Disbursement For:

☐ Primary☒ General2008
☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

2157.13

(a) **SUBTOTAL** of Itemized Independent Expenditures

2165.32

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 4 / 4

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Target

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Mailing Address
11120 Lomas Blvd NE

Amount

10.32

City
AlbuquerqueState
NMZip Code
87112Purpose of Expenditure
suppliesCategory/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Steve PearceCalendar Year-To-Date Per Election
for Office Sought

234.43

Disbursement For:
2008☐ Primary☒ General☐ Other (specify) _____Full Name (Last, First, Middle Initial) of Payee
Jesse Lifton

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Mailing Address
1600 San Pedro Blvd NE

Amount

40.00

City
AlbuquerqueState
NMZip Code
87102Purpose of Expenditure
transportCategory/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Steve PearceCalendar Year-To-Date Per Election
for Office Sought

5825.91

Disbursement For:
2008☐ Primary☒ General☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures

50.32

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

2514.32